

2016 SPARC Summer Program Enrollment Form

* PLEASE PRINT CLEARLY *

SPARC Programs AVAILABLE (Please Circle)

CAMP SITE

McBride - Sequiota - Summer Quest

RITTER SPRINGS

Wilson's Creek - Oak Grove

(Drop Off Locations)

BEFORE & AFTER SITE

Field - Harrison - Truman - Watkins - York

(Explore!)

Carver - Jarrett

For Staff Use Only

Circle Weeks Pd. 1 2 3 4 5 6 7 8 9 10 11 12 13

Date of Registration: _____

Receipt #: _____ Amount Pd. _____

Payment Method: Cash CC Check # _____

Credit Card Authorization Form on File _____

PARTICIPANT INFORMATION

Name #1	M / F	Birth Date:	Age:	Site Attending:
Name #2	M / F	Birth Date:	Age:	Site Attending:
Name #3	M / F	Birth Date:	Age:	Site Attending:
ADDRESS:		CITY:		ZIP CODE:

PARENT/GUARDIAN INFORMATION

Parent/Guardian #1:	Home Phone:	Cell Phone:	DOB:
Employer:	Work Phone: Extension:	Email:	
Parent/Guardian #2:	Home Phone:	Cell Phone:	DOB:
Employer:	Work Phone: Extension:	Email:	

EMERGENCY INFORMATION:

In case of an emergency, which hospital do you prefer?

Doctor: _____ Phone: _____

Allergies/Reaction (include food, drug, other allergies) :
Specify which child:

This participant is free of infectious disease. Yes _____ No _____

This participant is up to date on all immunizations. Yes _____ No _____

This participant is able to participate in recreation activities Yes _____ No _____

Participation limitations and/or restrictions _____

Does the participant take any medication during the regular school year? Yes _____ No _____

Will the participant take medication during the summer? Yes _____ No _____

If medication will need to be administered during a program by our staff then a Medication Form must be completed!

SPECIAL ACCOMMODATIONS

If necessary, please describe any accommodations (medical, physical, or behavioral needs) and/or other information that will assist camp staff in helping your child get the most out of our camp. (SPECIFY CHILD'S NAME)

FOR OFFICE USE ONLY:

INITIALS:

ACTIVE:

2016 SPARC PARTICIPANT INFORMATION

PARTICIPANT #1 NAME:		MEDICATIONS <u>YES</u> <u>NO</u>	MEDICATION NAME:
CAN YOUR CHILD BE PHOTOGRAPHED: <u>YES</u> <u>NO</u>	Kiddie Pool Only <u>YES</u> or <u>NO</u>	Swim Level <u>LOW</u> <u>MED</u> <u>HIGH</u>	Deep End <u>YES</u> or <u>NO</u>
PARTICIPANT #2 NAME:		MEDICATIONS <u>YES</u> <u>NO</u>	MEDICATION NAME:
CAN YOUR CHILD BE PHOTOGRAPHED: <u>YES</u> <u>NO</u>	Kiddie Pool Only <u>YES</u> or <u>NO</u>	Swim Level <u>LOW</u> <u>MED</u> <u>HIGH</u>	Deep End <u>YES</u> or <u>NO</u>
PARTICIPANT #3 NAME:		MEDICATIONS <u>YES</u> <u>NO</u>	MEDICATION NAME:
CAN YOUR CHILD BE PHOTOGRAPHED: <u>YES</u> <u>NO</u>	Kiddie Pool Only <u>YES</u> or <u>NO</u>	Swim Level <u>LOW</u> <u>MED</u> <u>HIGH</u>	Deep End <u>YES</u> or <u>NO</u>

Pick-Up Authorization

Parents & Guardians: Please include yourselves on this form!

Parent/Guardian #1 _____

Parent/Guardian #2 _____

Emergency Contact #3 _____

**Person to be reached if parent/guardian is not available in the event of an emergency.*

Home Phone _____ Cell or Work Phone _____ Relationship _____

Emergency Contact #4 _____

**Person to be reached if parent/guardian is not available in the event of an emergency.*

Home Phone _____ Cell or Work Phone _____ Relationship _____

Authorized Person #5 _____

Home Phone _____ Cell or Work Phone _____ Relationship _____

Authorized Person #6 _____

Home Phone _____ Cell or Work Phone _____ Relationship _____

***Name of person(s) NOT allowed to pick up my child:** _____

Appropriate custody paperwork must be attached if a **parent is not allowed to pick up a child.*

Office use only:

2016 SPARC Releases & Policies

Initial	SWIMMING
	Swimming involves transportation to and from as well as swimming at public pools. All participants must pass a swim test before being allowed to swim in the deep end.
Initial	FIELD TRIPS
	Day Camp activities involve transportation to and from the destination. Some field trips may require a separate nominal fee. By signing below, I grant permission for my child(ren) to be transported to field trips during the day camp programs. My signature also acknowledges that I may be required to provide additional fees for specific field trips.
Initial	EMERGENCY CLAUSE
	In the event I cannot be reached in an emergency, I hereby give my permission to employees of this SPARC program to secure proper medical care for my child as deemed necessary. This permission extends from minor first-aid treatment to (under a doctor's orders) hospitalization, injections, anesthesia, surgery, and other medical procedures deemed necessary.
Initial	RELEASE CLAUSE
	The undersigned hereby releases and holds harmless this SPARC program and any officers, employees or agents thereof, including without limitation the Springfield-Greene County Park Board, City of Springfield, from any and all claims liabilities, or demands whatsoever arising out of the enrollment or participation in any program by the participant herein.
Initial	LATE REGISTRATION FEE POLICY
	All payments must be made by 8:30a.m. on the Wednesday prior to the week your child is to attend the program. We urge you to register as soon as possible, as most weeks fill quickly. If spaces remain, we will continue to take registrations on the Thursday and Friday prior to camp; however, a \$10 per child Late Fee will be applied.
Initial	REFUND, CANCELLATION, AND TRANSFER POLICY
	Registration fees offset the cost to plan and schedule the program(s). Program success depends on the planned enrollment. We are not responsible for personal circumstances (e.g. illness, schedule changes, etc). Refund, Cancellation, and Transfer requests must be submitted in writing five (5) business days before the program begins. ALL REFUND, LATE-CANCELLATION, and LATE-TRANSFER REQUESTS will be charged a \$10.00 processing fee. Refunds, due to participant expulsion, WILL NOT be administered for that week; however, a refund will be given for future weeks of registration. Online registration convenience fees are non-refundable.
Initial	LATE PICK-UP POLICY
	All participants must be picked up no later than 6:00 pm. Any guardian arriving late will be charged \$5.00 for each 15 minutes he or she is late. Participants will not be allowed to return to the program until this fee is paid. If a parent is late more than three times, the child will not be allowed to return to the SPARC program.

I agree to all the releases and policies stated above:

Signature of Responsible Party _____ Date: _____

2016 SPARC Summer Program

Guidelines

WHAT A CAMPER NEEDS:

- Name written on all items
- Wear old play clothes — you may get dirty and wet!!
- Close toed shoes — NO FLIP FLOPS PLEASE!
- Sack lunch with a drink — NO GLASS PLEASE!
- Sun Screen and Bug Spray are recommended
- Swim wear and towel for swim days

WHAT A CAMPER ***DOES NOT*** NEED:

- Open toed shoes—NO SANDALS or FLIP FLOPS please!
- Valuable items that may be lost or broken
- Game Systems, MP3 Players, Cell Phones, Toys
- Nice clothes

1. REGISTRATION

- ⇒ All payments must be made **by 8:30 am** on the WEDNESDAY prior to the week your child will attend the program. We urge you to register as soon as possible, as most weeks fill quickly. If spaces remain, we will continue to take registration on the Thursday and Friday prior to the program; however, a \$10 per child Late Fee will be applied.
- ⇒ **RETURNED CHECKS/INSUFFICIENT FUNDS VIA CREDIT CARD** — Individuals whose checks are returned will no longer be registered for that week. If space is available, those individuals may re-register by paying with cash or money order. A \$30 fee (\$20 for the returned check plus \$10 late fee) will be charged in addition to the program fee.

2. REGISTRATION CANCELLATION & TRANSFER POLICY

- ⇒ Registration fees offset the cost to plan and schedule programs. Enrollment is depended on for a successful program. Please plan your schedule carefully, as responsibility cannot be accepted for personal circumstances.
- ⇒ Refund, Cancellation, and Transfer requests must be submitted in writing five (5) business days before the program begins.
- ⇒ All REFUND, LATE-CANCELLATION, and LATE-TRANSFER REQUESTS will be charged a \$10.00 processing fee.
- ⇒ Online registration convenience fees are non-refundable.
- ⇒ NO transfers or credits will be approved for absenteeism or expulsion from the program.

3. DISCIPLINE GUIDELINES

- ⇒ Participants are expected to display satisfactory behavior during program hours. If behavior problems arise, parents will be contacted. If the problems are persistent or severe, the child will be expelled.
- ⇒ The **discipline guidelines** below will be administered depending upon the severity of the incident and can include any or all, up to expulsion, on the first occurrence:
1) Verbal Warning 2) Time-Out 3) Visit with Site Director 4) Visit with Parents 5) Suspension/Expulsion from the Program.
- ⇒ **No refunds due to suspension or expulsion for the current week will be approved**, but a refund will be given for future weeks of registration.

4. SIGN IN AND SIGN OUT

- ⇒ Each child must be signed in and out daily.
- ⇒ **ID Cards will be checked!**
- ⇒ Children will only be released to a person designated by the parent/guardian to pick them up. **Parents—please include your name(s) on the list!**
- ⇒ Requests for an addition to the **Pick-up Authorization Form** to pick up a child, must be submitted in writing by the parent/guardian. For the security of the children and staff, pick-ups will only be allowed at off-school sites with prior notification.
- ⇒ If your child is to walk to or from SPARC, the Walk-Home Permission form must be on file.

5. Pick-Up/Drop-Off

- ⇒ Participants can be dropped **NO EARLIER than 7:00 am** (6:30 am for Before and After Programs) and must be picked up **NO LATER than 6:00 pm**. Every child must be signed in & out of program.
- ⇒ All participants must be picked up no later than 6:00pm. Any parent arriving late will be charged \$5.00 for each 15 minutes he or she is late. Participants will not be allowed to return to the program until this fee is paid. If a parent is late more than three times, the child will not be allowed to return to the SPARC program.
- ⇒ Authorities will be notified if children are not picked-up by 7:00 pm.
- ⇒ Every child must be signed in & out by a person listed on the child's pick-up authorization form.

6. INSURANCE

- ⇒ The Springfield-Greene County Park Board does not provide any accident or hospitalization insurance for program participants. We recommend that you review your own family policies for coverage information.

7. MEDICAL AUTHORIZATION

- ⇒ If your child needs to be given medication (prescription or over-the-counter) during program hours, you must have a completed **Medical Authorization** form on file. **No Medication will be given without this form on file.*
- ⇒ All medications must be in the original, properly labeled container when sent to program.

8. SICK CHILD

- ⇒ Please do not send your child with a fever or an illness.
- ⇒ If your child exhibits symptoms of illness or fever, you will be called to pick up your child.
 - We ask that you make every effort to pick up the child as quickly as possible.

9. INCLUSIVE RECREATION

- ⇒ If your child requires accommodations for participation, please notify us at least two weeks prior to the week they will attend.

10. EMERGENCY SITUATIONS

- ⇒ If you have an emergency and need to contact your child during program hours, please call the **SPARC Office @ (417) 837-5737**
- ⇒ The Site Director will be paged to return your call.

11. PARTICIPATION

- ⇒ Summer programs are designed with youth in mind.
- ⇒ We encourage all children to participate in, or at least try, all activities.